and this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

be form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as rected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for STRUCTIONS ec notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

02/05/2004

DARBY & DARBY P.C. 805 Third Avenue New York, NY 10022

05/10/2004 AWONDAF2 00000088 09846634

01 FC:1501 02 FC:1504

300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name) (Signature

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/846,634 | 05/01/2001 | Ick-Dong Yoo | 1728/1F088-US1 | 5673 |

TITLE OF INVENTION: NOVEL IMMUNO-STIMULATING POLYSACCHARIDE SUBSTANCE FROM PHELLINUS SPP. STRAIN AND USE THEREOF

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|---|--------------|-----------|---|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 05/05/2004 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | 7 . | |
| AFREMOVA, VERA | | 1651 | 435-101000 | - | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or | | |
| ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | gent) and the names of up to 2 regittorneys or agents. If no name is list vill be printed. | | |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate which an assignment has

| (A) NAME OF ASSIGNEE | (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | |
|--|---|--|--|--|--|--|--|
| Korea Institute of Science and Technology, Seoul, Korea | | | | | | | |
| Please check the appropriate assignee category or category | ries (will not be printed on the patent); unidividual NXorporation or other private group entity governments. | | | | | | |
| 4a. The following fee(s) are enclosed: | 4b. Payment of Fee(s): | | | | | | |
| Assue Fee | XX A check in the amount of the fee(s) is enclosed \$1630.00 | | | | | | |
| D Publication Fee | ☐ Payment by credit card. Form PTO-2038 is attached. | | | | | | |
| ☐ Advance Order - # of Copies | X 2 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-0100 (enclose an extra copy of this form). | | | | | | |
| Director for Patents is requested to apply the Issue Fee | nd Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. | | | | | | |

No.

NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

EXPRESS MAIL CERTIFICATE 418265477

5/04 Label No. I hereby bertify that, on the date indicated above, this paper or fee was deposited with the U.S. Postal Service & that it was addressed for delivery to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 by Express Mail Post Office to Addressee" service.

B.W.LEE

Signature